“STRESS INOCULATION”

A FORCE PRESERVATION TOOL

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Combat Operational Stress Injury

- **RATES**
  - OEF = 6-12%, OIF = 12-20%
  - Numbers will likely increase due to delay in onset

- **ASSOCIATED PROBLEMS**
  - 80% diagnosed with additional mental health/physical ailments
  - Marital problems 60 times more likely
  - Significantly increased risk for suicide

PTSD – A Cost Analysis

- **2008 RAND Corporation Study:**
  - 1.64 million personnel deployed to OIF/OEF since 1 Oct 2001
  - Estimated 21.8 % have symptoms of PTSD or depression
  - Estimated total treatment costs = 4-6.2 Billion
  - Estimated costs per person, two years post-deployment: between $5,900 and $25,760
- **II MEF: A Case Study:**
  - 16,000 + personnel **currently** attached to II MEF have been diagnosed with PTSD
  - Average visits to DIV Psych: 5.5/person
  - # visits to civilian providers unknown, but likely much higher
  - Assuming a minimum cost of $5,900/person, if 10% of these individuals had not needed treatment for PTSD, the savings would have been approx

STRESS INOCULATION: WHAT IS IT?

An internet-based program that strengthens the resiliency of Marines and Sailors by ...

- Evaluating resiliency prior to deployment
- Creating an individual risk profile
- Providing individual training/counseling

DEMONSTRATION

Combat Operational Stress Injury Prevention
Username:
Password:
Login
Forgot Password?
Register
Home
About
Assessments
Skills Training
Links
Contact
Welcome to the Combat Stress Injury Prevention Program.
The purpose of this website is to prevent combat related stress injuries.We offer assessment, education, skills training and real-time interaction with trained clinicians. These interventions are conducted with highest respect to the confidentiality and autonomy of our participants.
We welcome feedback about our program.
Please follow the contact link to provide feedback.

STRENGTHS

- Preventive
- Proactive
- Individualized
- Flexible
- Strengthens force preservation
- Benefits members beyond military service

CHALLENGES

- **Participants**:
  - Potential career impact , real or perceived, if identified by the protocol as being at risk for PTSD
  - Confidentiality: what will the command be told?

- **Counselors (trained grad students, supervised by licensed psychologists):**
  - Duty to warn
  - Duty to protect
  - Mandated reporting

- **Marine Corps/US Government:**
  - Potential exposure to liability if someone identified as being at risk develops PTSD

PROGRAM STATUS

- Developed prototype
- Briefed UNCW Military Advisory Board (Mar 2010)
- Ongoing collaboration with II MEF Staff
- Briefed CG, MARFORCOM (Jan 2011)
- Invited to brief ONR – DATE TBD

Funding Status

- Office of Naval Research (ONR)
  - Typically only funds up to 100K
  - Suggested two-phase alternative approach:
    1) Establish predictive utility of the protocol
    2) Implement prevention programming
- Other potential funding sources
  - Congressionally Directed Medical Research Programs (CDMRP)
  - Defense Health Program (DHP)
  - BUMED - Wounded, Ill & Injured (WII) Program

THE WAY AHEAD

- Funding for implementation study
- Once approved…
  - ❖ 12 Months needed to conduct study
  - ❖ 400 person test pool from II MEF
  - ❖ Cost: $4,250/person, or 1.7 million total
- Future costs
  - ❖ Est annual costs to sustain program at II MEF: $1,464,189
- Cost comparison, using RAND statistics
  - ❖ Conservatively, if 10% of the approximately 357,520 personnel who have developed PTSD/depression since 1 Oct 2001 had been successfully inoculated, savings to the DoD (based on lowest estimated cost of $5,900 per person) would have been approx $211,000,000

QUESTIONS?